SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate sche for each category of Detailed Summary	dule(s) (double (double)	FOR LINE NUMBER: PAGE 62 OF 63 check only one) 17
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NAME OF COMMITTEE (In Full) LUCILLE ROYBAL-ALLARD FOR CONGRESS			
Full Name (Last, First, Middle Initial) A. JULIA BROWNLEY FOR CONGRESS Mailing Address 728 W. EDNA PLACE			Date of Disbursement Date of Disbursement 17 2014
City State COVINA CA Purpose of Disbursement Contribution Candidate Name JULIA BROWNLEY Office Sought: House Senate Primary President State: CA District: 26	General	Category/ Type	Amount of Each Disbursement this Period 1000.00 Transaction ID : D550270
Full Name (Last, First, Middle Initial) FRIENDS OF LOIS CAPPS Mailing Address P.O. BOX 23940			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Category/ Type	Amount of Each Disbursement this Period 1000.00 Transaction ID: D550265
•	General	Category/ Type	Date of Disbursement M M / D D / Y Y Y Y Amount of Each Disbursement this Period 1000.00 Transaction ID: D550278
SUBTOTAL of Disbursements This Page (optional)			3000.00

TOTAL This Period (last page this line number only).....